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APPLICANTS

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** CONTINUING DATA ***************************

This application is a CON of 10/158,295 05/28/2002 ABN which is a CON of 09/592,218 06/12/2000 PAT 6,451,036
which is a CON of 09/398,241 09/17/1999 PAT 6,666,874
which is a CIP of 09/260,199 03/01/1999 PAT 6,206,898
which is a CIP of 09/058,513 04/10/1998 PAT 6,001,112

** FOREIGN APPLICATIONS *********************

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
** 01/24/2004

Foreign Priority claimed ☐ yes ☐ no 35 USC 119 (a-d) conditions met ☐ yes ☐ no ☐ Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 14	TOTAL CLAIMS 43	INDEPENDENT CLAIMS 5
Verified and Acknowledged _____ Examiner's Signature _____ Initials				

ADDRESS
20995

TITLE

Rotational atherectomy system with stationary cutting elements

FILING FEE RECEIVED 1740	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	☐ All Fees
		☐ 1.16 Fees (Filing)
		☐ 1.17 Fees (Processing Ext. of time)
		☐ 1.18 Fees (Issue)
		☐ Other _____
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